PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Sees and to the Consolidated Appropriations Act, 2005 (H.R. 4818). Effective on 12/08/2004.

TRANSMITTAL

For FY 2005 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT

Complete if Known Application Number 10/019,482 Filing Date June 18, 2002 First Named Inventor Gil PRIVE	nd to a collection of information	on unless it displays a valid Olvib Control number
Filing Date June 18, 2002 First Named Inventor Gil PRIVE	Co	mplete if Known
First Named Inventor Gil PRIVE	Application Number	10/019,482
	Filing Date	June 18, 2002
	First Named Inventor	Gil PRIVE
Examiner Name Maury Audet	Examiner Name	Maury Audet
Art Unit 1751	Art Unit	1751
Attorney Docket No. 010782.47985	Attorney Docket No.	010782.47985

METHOD OF PAYMENT (check all that apply)									
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):									
□ Deposit Account Dep	osit Account Nu	mber: 05-	1323 (Docket	No. 010782.47985)	Deposit Account N	lame: 23911		
For the above-identified	d deposit acco	ount, the Directo	r is hereby a	uthorized to: (ch	neck all that a	pply)			
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee									
☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments									
under 37 CFR 1.16 and	i 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization FEE CALCULATION	on P10-2036.								
	U AND EVAN	MINATION EEES							
1. BASIC FILING, SEARC	FILING		SEARC	H FEES	FXAMINAT	TION FEES			
	TILING	Small Entity	JEARC	Small Entity	270 (Will 47 (Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES							Small Entity		
Fee Description						Fee (\$)	Fee (\$)		
Each claim over 20 or, for	r Reissues lea	ach claim over 20	and more th	an in the original	patent	50	25		
Each independent claim						atent 200	100		
Multiple dependent claim						360	180		
Total Claims	Extra claim	s Fees(\$)	Fee Pai	d (\$)	Multi	iple Dependence C	<u>Claims</u>		
-20 or HP		×	=			Fee(S)	Fee Paid (\$)		
HP = highest number of total c									
Indep. Claims	Extra claim		<u>Fee Pai</u>	<u>d (\$)</u>					
-3 or HP x =									
HP = highest number of total claims paid for, if greater than 3									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra Sheets			additional 50 or fra		Fee (\$)	Fee Paid (\$)		
- 100 =		/ 50 =	R	ound up to a whole	number x		=		
4. OTHER FEES									
							Fee Paid (\$)		
Non-English Specification, \$130 fee (no small entity discount)									
Other Extension of Time – 4 m	onths – small er	ntity					\$795.00		

SUBMITTED BY	120				
Signature	1///0	Registration No. (Attorney/Agent)	26,269/26,269	Telephone	(202) 624-2500
Name (Print/Type)	J. D. Evans / J. D. Evans			Date June	e 13, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.